

## **APPLICATION DATA SHEET**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Title::	MORDENITE ZEOLITE ALKYLATION CATALYSTS
Attorney Docket Number::	T-6225
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	None
Total Drawing Sheets::	One
Small Entity?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor (1)
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Thomas
Middle Name::	V.
Family Name::	Harris
Name Suffix::	
City of Residence::	Benicia
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	183 West Seaview Drive
City of mailing address::	Benicia
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94510

Applicant Authority Type::	Inventor (2)
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Curt
Middle Name::	B.
Family Name::	Campbell
Name Suffix::	
City of Residence::	Hercules
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	118 Montego Drive
City of mailing address::	Hercules
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94547

Applicant Authority Type:: Inventor (3)  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Pierre  
Middle Name::  
Family Name:: Tequi  
Name Suffix::  
City of Residence:: Breaute  
State or Province of Residence::  
Country of Residence:: France  
Street of mailing address:: 1, rue des Tilleuls  
City of mailing address:: Breaute  
State or Province of mailing address::  
Postal or Zip Code of mailing address:: 76110

Applicant Authority Type:: Inventor (4)  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Jean-Louis  
Middle Name::  
Family Name:: Le Coent  
Name Suffix::  
City of Residence:: Le Havre  
State or Province of Residence::  
Country of Residence:: France  
Street of mailing address:: 80, Avenue General Rouelle  
City of mailing address:: Le Havre  
State or Province of mailing address::  
Postal or Zip Code of mailing address:: 76620

**Correspondence Information**

Corresponding Customer Number:: 34014  
Phone Number:: (925) 842-1538  
Fax Number:: (925) 842-2051

**Representative Information**

Representative Customer Number:: 34014

**Assignee Information**

Assignee Name:: Chevron Oronite Company LLC and  
Chevron Oronite S.A.